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SERIAL NUMBER 10/693,164	FILING OR 371(c) DATE 10/24/2003 RULE	CLASS 435	GROUP ART UNIT 1647	ATTORNEY DOCKET NO. 067437-5019US
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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/421,538 10/25/2002

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 02/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 60	TOTAL CLAIMS 108	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

67374

TITLE

METHODS OF IDENTIFYING REDUCED INTERNALIZATION TRANSMEMBRANE RECEPTOR AGONISTS

FILING FEE RECEIVED 5820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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